REPORT ON THE PUBLIC MEETINGS

HELD BY THE

SENIORS ADVISORY COUNCIL FOR ALBERTA

IN 1991

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EXECUTIVE SUMMARY AND COMMENTS

In 1991, the Seniors Advisory Council for Alberta held 44 public meetings in various regions of the province. The meetings were organized and hosted by local organizations in response to a letter sent by the chairman of the Council in January 1991. Sixteen of the meetings were held in senior centres, and the remainder were held in community buildings, seniors' housing complexes and lodges, long term care centres and hospitals.

Approximately 1,400 persons attended. They were mainly seniors, but at each meeting there were always a few people who were working with older people, for example, Family and Community Support Service workers and home care staff.

The meetings were not "consultation" meetings to discuss issues, but rather meetings for informing and listening to assist us in making good recommendations to the government. Seniors were telling us they wanted to be heard by Council, and we ourselves felt a need to increase our direct contact with the seniors throughout the province.

We prepared a presentation package which contained information on the provincial programs used to a great extent (85% or more) by seniors. Copies of this package were distributed to those attending each meeting, and the material from the package formed the major part of our presentation. Following the presentation, we had an opportunity to listen to the questions and comments raised by those attending.

One Council member assumed the responsibility for coordinating the meetings and for presenting the information, but she was always accompanied by a second person, often another member of Council. This was important, for the second person was able to keep a careful record of all the questions, comments and concerns brought to our attention.

The information from the recordings has been categorized and entered into a computer program. This makes it possible for us to identify major areas of concern to seniors and details of these concerns, by location of meeting and/or by department responsible. This information will be available to anyone who would find it useful.

We found the public meetings to be an effective way to reach more of the seniors of Alberta--to inform, to listen and to learn from them. This report is a record of what we heard from Alberta seniors.

Seniors appreciated the meetings. We were told, "Seniors like the non-bureaucratic approach. They find the meetings empowering for they feel they are being listened to." There were a number of comments about our Council which reflected a general feeling that our work is effective, but that our role in influencing the government should be strengthened, thereby increasing our ability to carry out the legislated mandate of the Council.

We found that clarifying program information was an important part of what we did at the meetings. Seniors asked us many questions about the details of programs, especially of those health benefit programs where recent changes had been made. There was some concern and confusion and, in a number of instances, seniors and those working with them had misinformation. Our clarification of the program details relieved their anxiety and concern. This experience impressed upon us the need for the government to be very clear and direct in announcing changes in programs for seniors.

On the basis of our experience with these meetings, we believe that we must maintain and strengthen our information service, continue providing information at the public meetings and look at further and more innovative ways of informing older adults. Having accurate, current information about programs and knowing how to access the programs helps senior people make appropriate decisions about their lives and is an important aspect of their maintaining independence.

There were four areas of concern raised quite consistently by older people at most of the meetings, whether in an urban or rural area, in the north or the south of the province. These were home care, services to help you stay in your home (assist with daily chores), transportation and housing.

We often heard that home care needs more resources. "Seniors want to stay in their own homes with help from home care." We became even more aware of the importance of home care as a source of information and in helping people access and coordinate home-delivered services.

Older people also pointed out the need for services such as heavy cleaning, yard work and snow removal, home maintenance assistance, meals on wheels and wheels to meals and help with grocery shopping. They often seemed willing to pay something for this help, but did not know how and where to get it. This reinforces our belief that the non-medical support services are a most important part of a comprehensive home care program. We would also like to find ways to encourage seniors to help each other with the provision of these support services. The Seniors for Seniors Co-op in Brandon, Manitoba is an example of what can be done when seniors organize specifically for this purpose.

Transportation was raised frequently as a concern, especially in rural areas where the population is sparse and the distances great. The need for transportation assistance for seniors will become increasingly important in the future if there is a general curtailment of government funding for facilities and services.

Comments about housing were made at almost every meeting. Seniors appreciate the Property Tax Reduction Benefit, the renters' grants and the Seniors Independent Living Program for they help people maintain their own homes. Many suggestions were made regarding seniors' self-contained units, including the suggestion that seniors living in these apartments should be asked about what "works" and what does not "work."

Seniors told us that they want options/choices in housing and mentioned the following: seniors' housing for middle-income people, apartments with services such as meals, garden suites and cooperative housing. There was some interest among seniors in organizing their own cooperative projects. We believe that it would be helpful for the government to provide more advice and direction to seniors' organizations and other community groups wishing to develop alternative forms of housing for seniors.

Finally, we were very impressed with the care provided in a long term care centre in the province. It seemed to us to be "life-giving" care, and we wrote to the Minister of Health about this. We know what can take place in Alberta's long term care facilities--that they have the capability to provide excellent care and a high quality of life for residents. We hope that in the future we will see this quality of care and concern in all our long term care centres.

Seniors have told us much. Their comments and observations impressed us. Much of what we have learned has given us additional insights into the issues we have been studying this year and is being incorporated into our 1991/92 annual report. We will be continuing our public meetings. There are many invitations to which we have not yet responded, and we feel that these meetings have proven to be an excellent way to both inform and listen to the seniors of Alberta.

I. INTRODUCTION

Purpose of the Public Meetings-- the "Why"

In 1991, the Seniors Advisory Council for Alberta held public meetings with seniors and people working with seniors. These meetings provided information about Alberta's programs for older people and an opportunity for members to listen to the seniors. They were not "consultation" meetings to discuss issues, but rather meetings for informing and listening to assist us in making good recommendations to the government.

To increase our direct contact with seniors

Early in the year, we were made aware of the need for greater contact and communication with older people throughout the province. Seniors were telling us they wanted to be heard by Council. We felt a need to increase our direct contact with the seniors throughout the province. All of us, in various ways, are in contact with seniors' organizations and/or with agencies working on behalf of older people. However, we wished to expand this involvement, so that our Council could truly act as a channel to the Government of Alberta for the concerns of the seniors of Alberta. We felt that this would also ensure that our annual report reflects the views of seniors and contains pertinent and relevant recommendations.

We were aware that there was a continuing need for information dissemination. More calls were coming to our Seniors Information Line, and the need for information has been raised at the forums/workshops we have sponsored --forums on women and aging, the use of medications by seniors, and special workshops for local information workers and for constituency secretaries.

We decided that the most appropriate way of both informing and listening would be to hold special meetings throughout the province, on invitation from local organizations.

Organizing the Public Meetings--the "How"

110 invitations in the first month

With the first issue in 1991 of our bi-monthly Fact Sheet, a four-page newsletter, our chairman, Mr. Tom Musgrove, MLA, Bow Valley, sent a letter to approximately 3,000 agencies and individuals in Alberta. In the letter, see Appendix I, he explained the purpose of the public meetings and asked that groups contact the Council office, if they were interested in holding such a meeting. An emphasis was placed on how their comments would assist us in reflecting the views of older Albertans. Within the first month, we received 110 invitations from organizations throughout the province!

We are gradually responding to these invitations. Even though our resources are limited, we have made a commitment to respond to every invitation. One member of the Council has assumed responsibility for coordinating the planning of the meetings, making arrangements with local organizations and presenting the information. At least one other member of Council (sometimes two) or a staff member has accompanied her at all the public meetings to prepare a record of the discussion and of the concerns raised by the participants. In all instances, local organizations arranged for the facilities and provided refreshments.

The Council office prepared a package of information to assist with the presentation. We made copies of it which were distributed to all participants at the start of each meeting. We did this rather than use overheads on the advice of older members of our Council who felt that this would be more helpful. Also, those attending were able to keep the packages for later reference.

This "presentation package" contained brief information about the Council's responsibilities and activities. Also included was some very brief demographic information and a description of the 18 programs where the vast majority of the users (85% or more) were persons aged 65 and over. Each provincial program was described briefly along with information about the extent of its use by seniors in 1989/90 and the public expenditures on it in that year. The programs were listed by provincial department responsible (Family and Social Services, Health, Municipal Affairs and Transportation and Utilities). The last page of the package had a summary, which showed that Alberta Health provided 70% of the almost

one billion dollars of public expenditures on programs relevant for seniors in 1989/90. Of the remaining dollars, 21% were provided by Alberta Municipal Affairs, 7% by Family and Social Services and 2% by Transportation and Utilities.

Before the presentation package was first used, all members of our Council reviewed it carefully, to ensure that the information was presented clearly and concisely. We have updated the presentation package as programs changed. As well, seniors at the public meetings have given us helpful suggestions for the presentation package.

At one meeting we were asked to make an audio cassette of the presentation for use by older persons with visual impairment. We were also asked at another meeting to prepare the presentation in Cree. The response to these suggestions will depend on our resources in 1992/93.

We took display copies of 16 of our publications to each meeting, for example, the Programs for Seniors booklet, a report, "Older Albertans, 1990," the "On Aging" kit, and the list of other resource materials from the Council office. This provided an opportunity for those attending the meetings to review the material and request copies, when interested.

The Meetings--"What Happened"

44 meetings in 1991

We held forty-four meetings in 1991. Up to eight different organizations sometimes participated in a meeting. For example, at the public meeting held at the Lethbridge Senior Citizens Organization, there were persons attending from seniors' organizations in the surrounding communities. At one meeting in Calgary there were representatives from a variety of agencies and special groups.

We have been able to hold meetings in all regions of the province (14 in Edmonton and Calgary), and in a variety of locations: 16 in senior centres, 6 in seniors' housing complexes and lodges, 8 in long term care centres and hospitals, and 11 in community facilities. Appendix II has a list of the communities and locations of the meetings.

Approximately 1,400 persons in all attended these meetings. The vast majority were older adults, most of whom were living in their own homes or apartments. We were also able to speak with residents in lodges and long term care centres. Attending almost every meeting were some persons who were working with seniors--Family and Community Support Service directors and/or staff, community health nurses, home care nurses, homemakers, and staff of seniors' housing complexes, lodges or long term care centres. On a few occasions relatives of seniors attended.

As mentioned earlier, at least two persons from the Council were present at each meeting to ensure that a detailed recording was made. We included comments from the meeting as a whole as well as comments made to us by individuals following the meeting. We found that at each meeting, following the discussions, many individuals came to us with concerns. These were often people who were not comfortable speaking in public or who had particular personal concerns.

The information from the recordings of the meetings has been categorized and entered into a computer program. This makes it possible for us to identify major areas of concern to seniors and details of these concerns, by location of meeting and/or by department responsible. This information will be available to anyone who would find it useful.

Whenever we heard significant positive or negative comments about a program, we forwarded the information to the Minister concerned. For example, we were particularly impressed with the atmosphere of one long term care centre and the care and concern provided to the residents. A letter was sent to the Minister of Health in which we said that this centre shows that there is a substantial difference between what is life sustaining and what is life giving. She responded, thanking us for the "kind words and support for the administration and staff" of this centre. "Their method of providing long term care is exemplary and obviously has a very positive impact on the residents."

General Comments from those Attending

The response has been most positive. We often received expressions of appreciation at meetings and, as well, in follow-up letters to the Council. Some

people said that the meetings are a very good use of the Council and were pleased that members of the Council had made an effort to come to their communities.

"Meetings--empowering for seniors--information presented in a non-bureaucratic fashion."

One person said, "these meetings are empowering for seniors....The information is presented in a non-bureaucratic fashion, and seniors feel they are being listened to--that they are really being heard."

Seniors appeared to be particularly pleased to be given information in a clear, concise and friendly fashion. Many were confused about the program changes made in the spring of the year, shortly after we started holding the meetings, and many were feeling quite anxious and insecure. They were, in general, reassured once there was clarification.

Key function of meetings--clarification

One key function of the meetings has been clarification. Often seniors, people working with them, and professionals had a general idea or understanding of a program, but did not know important details or had misinformation. This clarification took place both in the general discussions and with individuals following the meetings.

There were a few negative comments made about seniors' services, the government in general and some of the program changes that have been made.

However, at each public meeting at least one person spoke in positive terms about Alberta, its programs for seniors and the situation of seniors in general. For example, seniors said:

"The government is cutting seniors' programs and giving to corporations."
"Seniors in Alberta don't need anything else."
"Seniors are now seeing an erosion of benefits."
"Cuts always affect low income people."
"Seniors in Alberta are lucky. The programs are very good."
"Seniors in Alberta are quite well off."

II. MAJOR AREAS OF CONCERN RAISED AT THE MEETINGS

During the 44 public meetings, seniors raised a number of concerns and questions. For the purposes of this report, these are grouped into the following areas: functions of the Council; the need for information; health; housing; transportation; the financing of programs for seniors; senior centres; older aboriginal people; and other concerns. We have included many of the comments (some contradictory) which we heard in our obtaining of an overview of "grass roots" senior opinion in Alberta.

Functions of the Council

Comments were made about our Council's functions and effectiveness at a number of the meetings. Some of the comments were most positive. People liked the presentation package and the public meetings in general. They were grateful that the Council is working for seniors. There were also comments about the effective work of our office, and appreciation expressed about the forums and workshops we have sponsored, in particular the annual workshop for information workers with seniors. The only exception to these positive comments about our work was at one meeting, where one or two people questioned the validity of the information in the presentation package.

"Council needs to be listened to by Government."

Other comments, while not negative, were concerns about the effectiveness of the Council's influence on government decision-making. "Does the government really listen to the Council?" "Nobody listens to the Council." "Seniors should be able to provide consultation to the government through the Council, but the Council then needs to be listened to by the government."

Several times, we were asked about the Council's position on the changes to seniors' programs which were made this year. "Has the Council taken a stand?" We had to reply honestly that there was no consensus among our members about these changes. Several times we were asked if we had been consulted prior to the program changes being made, and at different meetings the need for the

these changes. Several times we were asked if we had been consulted prior to the program changes being made, and at different meetings the need for the government to consult with seniors about policies and programs relating to seniors was stressed.

At one meeting prior to the passing of the Seniors Advisory Council Act (our legislative base), seniors said that they were pleased about this proposed development but stressed the need for the Council to be "independent" and for the members of the Council to be older people.

Need for Information

We found that the provision of information to seniors was an important part of our public meetings. There were many, many questions about details of programs at every public meeting. Seniors appeared to have general knowledge about a program, but were vague about details such as eligibility criteria, how to apply for programs and their actual provisions. Not infrequently, they had misinformation as well as not enough information.

Many of the questions related to the changes made in the health benefit programs, as might be expected. Seniors and even professional people, were concerned and confused (and sometimes a little angry) about the changes made. This may have been partly due to the initial unclear and indirect announcement of the program changes. People wanted to be sure that they knew exactly what the programs would now provide. There was also some confusion and lack of information about some of the other programs, such as the housing programs.

We soon realized that clarifying the details of a program often relieved anxiety and fears, in particular for those programs where changes had been made.

"Programs for Seniors booklet - It's our bible."

Seniors made a number of positive comments about the booklet, Programs for Seniors, which is written and published by our Council. One comment was that the booklet "is invaluable." Several asked if it will be published on an annual basis. A number of times people working with seniors emphasized the booklet's importance to them--how helpful

it is. One said, "It's our bible." Participants at a meeting suggested that the booklet should be sent to all physicians. (We have now done this!)

Health

We heard more comments and questions about health care programs than about any other area of concern. Health care benefits and services were touched upon in one way or another by the seniors and others at all of the meetings.

Alberta Health Care Insurance. Several times we were asked why the government no longer sends out annual statements showing what has been paid on one's behalf for medical services. There were some questions about coverage for eye examinations and questions about cataract operations for which people pay privately. Two or three seniors suggested there should be user fees for health services to increase a sense of personal responsibility. Another suggestion made was that lottery funds be used to meet health care costs.

Extended Health Benefits Program (EHB). People asked for details about the Extended Health Benefits Program which provides partial coverage for dental care and eyeglasses.

Seniors expressed concern about the increasing costs of both eyeglasses and dental care, and the amount that they must now pay in addition to what the program pays. Several said that the reduction in the amount the program covers for dental care is a source of worry. Seniors said that some dentists appear to be charging considerably more than the fee schedule established by the program.

Need to recycle expensive equipment

Aids to Daily Living Program (AADL). As with the EHB program, many questions were asked about the current coverage. There was clearly some confusion, and clarification needed, in particular about coverage for oxygen. At several meetings seniors asked why two hearing aids are not available under the program. We were asked about also including Able Walkers. Several times the need to recycle expensive equipment was pointed

out. It was suggested that there be damage deposits for equipment, which would be refunded upon return.

At another meeting the importance of the program was stressed, and it was said that with more help available more seniors could stay in their own homes.

Alberta Blue Cross Benefit Package. Most of the questions and concerns about this benefit program related to coverage for the costs of prescription and over-the-counter drugs. As with the previous two programs, even professionals were confused about the program changes. Our explanation of the changes relieved much concern. We heard, "Seniors can afford the 20% for prescription drugs, but no more than that."

There was discussion about the use of generic drugs ("Why does the government not use these as they are cheaper?"), about the need for the type of computerized system that the province of Saskatchewan has, and about the need for more education about the use of medications by seniors. We were complimented on our sponsoring of forums on medication use by seniors.

The high cost and coordination of ambulance service, particularly in the rural areas, was raised.

Community Health Nursing. Seniors indicated, at one meeting, that some community health nursing services in their community had been discontinued and that, as a result, a nurse no longer came to the seniors' apartments or to seniors' homes. Blood pressure clinics and foot care clinics were no longer being held in their area, and in one instance a senior had to go four times to the health clinic before she was able to see a nurse. (We understand that this was a temporary situation and that some of the services have been restored. The comments, however, indicate the importance the seniors placed on these services.)

Seniors asked, "How can we let the government know home care needs more funding?"

Home Care/Community Long Term Care and the Single Point of Entry. There were many comments strongly supporting the home care program, the majority saying that it should be given more money, and that it should be advertised more as not all seniors are aware of

its availability. Several seniors receiving home care spoke highly of the services. Some seniors wanted to find out how they could let the government know that they believe home care needs more funding. "People want to remain in their own homes for as long as possible, with assistance from home care." This was said a number of times.

It was noted that funding for home care is limited, and people wondered what the impact on seniors will be with expansion of the program to persons under 65 in need of support services only.

In one community, hospital staff were most concerned that individuals discharged on a trial basis could not receive home care. Patients had to be permanently discharged before being eligible. This limits effective discharge planning.

In another community it was said that home care is transferring responsibility for some support services it provided to the municipal Family and Community Support Services (FCSS), and FCSS does not have adequate funding.

At several meetings we were made aware of the need for more home care staff and more training for that staff.

There was some understanding of the single point of entry and general support for it. In some instances we provided more details. The importance of involving the family in the process was mentioned.

At every meeting seniors asked about services to assist with daily chores.

Non-medical Support Services (Services to help you stay in your home). One of the most frequent areas of concern raised at the 44 meetings was the need for non-medical support services, the services which assist older people with daily chores. We learned of people who moved to seniors' housing simply because they needed help with grocery shopping.

Seniors pointed out the importance of help with heavy household chores, grocery shopping, snow removal, yard work, home repairs, wheels to meals and meals on wheels. It seemed to us that most seniors would be willing to pay something for this type of help, but that they simply did not know where to look for it or how

to arrange for it. At a few meetings there were staff of the municipal Family and Community Support Services Program present who were able to indicate where help might be available in their communities.

Day Programs, Respite Care and Caregivers. There were a number of questions about day programs or "day care." For example, what is its purpose and what are the possibilities of getting a program going? Where is the nearest day program? "It is badly needed." People spoke about the need for respite and relief for caregivers of frail and disabled older adults. A comment was made about the need for financial help for a caregiver.

Long Term Care Centres. Seniors attending our meetings spoke about the increase in accommodation charges ("Who sets these fees?") and the need:

- to have separate programs and space for older people with dementia;
- to have more private rooms;
- to ensure that bathrooms in facilities can accommodate wheelchairs;
- to have chapels in long term care facilities;
- to have R. N. supervision, social work, rehabilitation services and pastoral care in long term care centres;

Also discussed were the difficulties which result when only one of a couple is institutionalized and the importance of discharge planning.

We were very impressed with the excellent care provided in one centre. We saw it as an example of "life-giving" care.

Housing

Benefits and programs related to housing comprised a large part of the discussions at almost all the public meetings. It was obvious that housing--shelter--is of major interest to older people. Several seniors pointed out that appropriate housing has a major bearing on one's ability to live "independently".

Property Tax Reduction Benefits. We were asked to provide information about this program. At several meetings, seniors expressed some concern that this program might be eliminated. We heard, "Please don't take the property tax

"Please don't take the property tax benefit away from seniors."

benefit away from seniors--they really need it....Seniors are happy to stay in their own homes and don't want to go into institutions. The Property Tax Benefit is one way to help keep seniors in their own homes."

Senior Citizen Renter Assistance Program. There were some general information questions--where to get the forms, eligibility for widowed persons, how is the program administered and, as with the above program, concern that the renter's grant may not be continued.

Seniors' Independent Living Program. In addition to requesting detailed information about the program, the following was said: "The income cutoff is too low....The grant is not large enough...There have been bad experiences with contractors and salespeople." Several times we were asked if the government "checks up" on the use of these grants. We were also asked if there will be another home improvement grant program in the future.

Seniors' Emergency Medical Alert Program. While there were some generally positive comments about this program, seniors also talked about bad experiences with salespeople for these units. They said that seniors are being pressured into buying units, and that some seniors are not told that there will be a continuing monthly fee. It was suggested that the grant for these units should not be included in the Seniors Independent Living Program because some seniors who need the units have spent all their grant funds. We were told that renting the units from an agency would be preferable to buying them.

"Government should focus of self-contained units rather than nursing homes."

Seniors' Self-Contained Units (apartments). Seniors are most interested in this program, and they said that they believed that such apartments are "cheaper for the government to build than lodges and nursing homes." "Is the government focusing on keeping seniors in their own homes and on more seniors' self-contained units with services rather than nursing homes? If they aren't, they should be."

At a number of meetings seniors emphasized strongly that they should be involved in the design of such housing. It was suggested that seniors already living in a

project should be asked about the "good and the bad" points of design. Several times seniors asked that some apartment complexes have two-bedroom units; the current apartment units are "not large enough for couples." "Bachelor apartments are a waste of money." At one meeting seniors said that the lack of two-bedroom apartments was resulting in some vacancies in a housing project. Seniors and others pointed out the need for balconies, elevators, air conditioning and recreation space. At one meeting we heard some seniors say that they preferred ground level apartments with small garden plots.

While at least one comment was made about the need for a ceiling on the rents charged, a comment at another meeting was that "some wealthy seniors are living in subsidized housing."

Lodges. Several seniors living in lodges expressed satisfaction with their accommodation and food. There were some general questions about lodges, and in at least two communities requests for a lodge. We received, however, a number of suggestions for the lodge program: a need for more private rooms, more recreational activities and trained recreational therapists; a need to "get seniors out, not just take entertainment to them." It was suggested that some staff "need an attitude change....They treat seniors as stupid." It was said that some seniors are "over-medicated in lodges and nursing homes."

Cooperative Housing. At several meetings we were asked about cooperative housing--how can one get a project started? What assistance is available? There was discussion about the positive and negative aspects of such housing, and in at least two places seniors were looking at trying to start cooperative housing projects.

There is a great need for seniors' housing for middle-income older people.

Housing Variations, including Garden Suites. People asked that the government consider a variety of housing options for seniors. At several meetings we heard about a need for seniors' housing for middle-income older people. We also learned that some seniors are interested in apartments with services, such as meal services. Other options suggested were suites for caregivers to live in a senior's home and mobile home parks for seniors.

There were questions about garden suites or "granny flats," and a number of positive comments made. Seniors said that garden suites are a good option for some (though not all) older people. One woman, a senior herself, said "I would rather have my mother in my backyard than 115 miles away."

Transportation

The need for adequate transportation services was raised a number of times, especially at the meetings in rural communities where public transportation services are not as available. These services were seen as a support for independence. At a few meetings seniors said that the special services provided in their communities were good.

However, we heard a number of seniors at other meetings say that the grants based on population provided to municipalities to support transportation services for seniors and disabled persons are inadequate. Seniors wanted to know how they could find out what is happening with the grant in their community, saying municipalities should account for it publicly.

There appears to be a special problem with transportation in the north where the population is sparse and the distances great. We heard about the high cost of transportation for seniors needing to travel some distance to see health specialists. It was said that the transportation grant funds should be used to meet health care needs, not for recreation purposes. We heard the opposite in other places.

" I live out in the country. It is cheaper for the government to provide me with transportation and keep me in my own home than have me move to a seniors' apartment or lodge in town."

Transportation services may become increasingly important if more seniors have to move to facilities or receive services away from their home communities. One senior said, "I live out in the country. It is cheaper to provide me with transportation and keep me in my own home than to have me move to a seniors' apartment or lodge in town." Funding for the development of good transportation assistance will become increasingly important if there is a general curtailment of government funding for facilities and other services for seniors.

Income Support

Almost all the questions and comments relating to income support were about the need for the Alberta Widows' Pension Program to expand coverage to divorced and single people. Relatively little else was said about pensions and income support, though on two different occasions we were asked if there will be an increase in the amount of the Alberta Assured Income Plan payments. We were asked about possible indexing of this benefit in relation to the cost of living as are the federal income security program benefits. One senior said, "Seniors should not pay income tax if their incomes are under $20,000 annually."

Financing of Programs for Seniors

At a number of meetings seniors and others talked about future financing of seniors' programs. Should all services be free regardless of income and assets?

No agreement among seniors

There was some discussion about income testing for program eligibility, and again we heard a variety of opinions. One senior felt there should be user fees for health services. Another said that paying something for a service "creates respect for what you are getting." Some seniors proposed income testing for benefits and services, but added that poorer seniors should not be penalized--"poverty level should be looked after." At one meeting someone said, "Why should people with money go into a lodge." Several seniors (at two different meetings) suggested using the income tax system. One woman said, "Benefits should remain the same for all because people do not want to have to identify themselves as not having much money. But people with money should then pay it back through taxes." One comment in regard to this was, however, that the income tax should be fair.

Other seniors disagreed with the concept of income testing to determine eligibility for programs. "Who wants to be interrogated by having to tell income?" "Seniors are too proud to have a means test. They would do without." They said that they had worked hard all their lives and saved for their old age and felt they should not be penalized because of this. Others who had not worked and saved would be able

to get the benefits, but not they. "Why subsidize those who spent during all their lives?" "All seniors should be treated the same whether they saved or not." "Some seniors are hiding their money so that the government does not know they have it." In one meeting, a senior said, "Look at all the volunteer work seniors do and what credit do we get?"

"With fewer people working where will government get the money?"

We found that there was no agreement among seniors about shifting expenditures from one program area to another. One senior said, "Money should be spent differently to help more people." Another senior said, "Seniors are sometimes given too much. Money for food and shelter should be directed to children as most seniors are well able to manage." It was also said, "Health is very important. The money should be spent on glasses, hearing aids, and teeth. These essentials should not be cut." Some seniors indicated that there were other areas in which the government could cut back its spending and suggested that there is too much "overhead and administrative staff in government and other services" and too much "funding of corporations, etc." We heard it said at one meeting that "with fewer people working, where will government get the money?" We also heard that if one reduced income taxes the need for programs could be reduced.

We heard some general concerns about the changes made this year in some of the seniors' programs. It was said that the continual small cuts can affect seniors, especially those on the lowest end of the scale. Some seniors also wondered why there are the differences among the programs in terms of user fees--some are 20% and others 25% of the cost of the service/benefit.

Senior Centres

At several meetings there was discussion about the cutbacks in the funding of senior centres. Seniors said that there is a lack of understanding of the importance of centres, and that they help seniors maintain their independence. The value of centres is not recognized. "Seniors are staying in their own homes longer, so more use and need centres." Some said that the funding for centres should come directly from the government, not through the Family and Community Support Services Program.

Older Aboriginal People

They said, "Aboriginal peoples should receive more understanding and support for their culture."

Older aboriginal people have special needs. It was said that for them the age for benefits should be changed from age 65 to 60. Information material should be translated into Cree, and a special tape in Cree made for them. Garden suites are particularly appropriate for these older people in outlying areas. There is also a need for funding for senior housing. For those who live in rural areas, transportation is a problem. A Metis group said that Metis seniors want to be helped by Metis home care workers. They said that they need more literacy programs and suggested that they should receive more understanding and support for their culture.

Other concerns

We heard some concern about the **increase in park fees** for seniors. One senior said, "Why not give seniors a reduced rate during the week, say Monday through Thursday?" It was mentioned that some lower income seniors have had to give up camping which was one of their main forms of recreation.

A timely concern raised related to the **rights of grandparents in cases of divorce**. We were presented with a brief and told that Quebec has legislation governing this.

Funding for libraries to purchase **large print books** was proposed.

There were quite a few comments about seniors and **consumer fraud**--salespeople taking advantage of older people.

We heard some discussion of the need to promote a variety of **retirement options** for people.

Some seniors were upset that the funding for some special educational programs (**spring sessions for seniors**) was discontinued.

In one community the need for more funding for **Family and Community Support Services** was mentioned, and it was suggested that the allocation of this funding should be related to the demographics of the municipality or region.

It was mentioned that there is too much paperwork and bureaucracy in connection with obtaining **guardianship.**

The need for innovative services for **inner city elderly**, a special needs group, was brought up at an urban meeting.

APPENDIX I

CHAIRMAN'S LETTER

CONCERNING PUBLIC MEETINGS

HELD BY THE

SENIORS ADVISORY COUNCIL FOR ALBERTA

Alberta
SENIORS ADVISORY COUNCIL

405, Energy Square, 10109 - 106 Street, Edmonton, Alberta T5J 3L7, Telephone (403) 427-7876 or Toll Free 1-800-642-3853, FAX 422-6051

Greetings:

We, the members of the Seniors Advisory Council for Alberta, would be pleased to meet with members of your organization to talk about benefits, programs and services for seniors. We would be glad to provide you with the information we have on the use of the programs and public expenditures on them. Also, it would be most helpful for us to hear your views. As you may know, we submit an annual report to the Government with recommendations regarding issues affecting seniors. Your comments will assist us and ensure that our report reflects the views of the seniors of Alberta.

A committee of Council would like to come to your community for such a meeting. Please contact Barbara Armstrong at our office (long distance toll free, 1-800-642-3853; Edmonton calling area 427-7876).

We look forward to hearing from you.

Yours sincerely,

Thos. N. Musgrove

Thos. N. Musgrove, M.L.A.
Bow Valley Constituency
Chairman

Printed on Recycled Paper

APPENDIX II

LOCATION OF

PUBLIC MEETINGS

1991 PUBLIC MEETINGS

AIRDRIE
LEGION
TUESDAY MAY 28, 1991
7:00 P.M.

ALIX
RECECCA HALL
THURSDAY, MAY 23, 1991
7:30 P.M.

ARDROSSAN
ARDROSSAN SENIORS ACTIVITY CENTRE
February 26, 1991
1:00 P.M.

ATHABASCA
THURSDAY, SEPTEMBER 19, 1991
2:00 P.M.

BANFF/CANMORE
BANFF SENIOR CENTRE
TUESDAY, APRIL 30, 1991
2:00 P.M.

BLACKFALDS
BLACKFALDS SENIOR CITIZENS CENTRE
WEDNESDAY, MAY 15, 1991
2:00 P.M.

BLAIRMORE
YORK CREEK LODGE
THURSDAY, JULY 11, 1991
2:00 P.M.

BROOKS
ROYAL CANADIAN LEGION
MONDAY, JUNE 3, 1991
2:00 P.M.

BROWNFIELD
NEW DAWN CENTRE
THURSDAY, SEPTEMBER 18, 1991
2:00 P.M

CADOGAN
CADOGAN HILLSIDE SENIORS
TUESDAY, MAY 21, 1991
2:00 P.M.

CALGARY
CANADIAN NATIONAL INSTITUTE FOR THE BLIND (CNIB)
FRIDAY, MAY 29, 1991
3:00 P.M.

CALGARY
CEDAR VILLA (EXTENDICARE NURSING HOME)
MONDAY, MAY 13, 1991
7:30 P.M.

CALGARY
FISH CREEK LIBRARY
FRIDAY, NOVEMBER 22, 1991
11:30 A.M.

CALGARY
FOREST LAWN SENIORS
THURSDAY, MAY 29, 1991
12:30 P.M.

CALGARY
HILLHURST SENIORS GROUP – GO GETTERS
WEDNESDAY, APRIL 24, 1991
2:00 P.M.

CALGARY
SOUTHWOOD COMMUNITY HALL
THURSDAY, JUNE 20, 1991
2:00 P.M.

CASTOR
GOLDEN CIRCLE CLUB
WEDNESDAY, JUNE 5, 1991
10:00 A.M.

CLARESHOLM
WILLOW CREEK AUXILIARY HOSPITAL & NURSING HOME
WEDNESDAY, JULY 10, 1991
7:00 P.M.

CORONATION
GOLDEN AGE DROP IN CENTRE
WEDNESDAY, SEPTEMBER 18, 1991
10:00 A.M.

EDMONTON
ANSGAR VILLA
WEDNESDAY, MARCH 6, 1991
10:30 A.M.

EDMONTON
CANTERBURY COURT
SUNDAY, MARCH 18, 1991
2:00 P.M.

EDMONTON
METIS WOMEN'S ADVISORY COUNCIL MEETING
WEDNESDAY, MAY 8, 1991
12:15 P.M.

EDMONTON
NORWOOD EXTENDED CARE CENTRE
MONDAY, APRIL 22, 1991
EVENING

EDMONTON
ROYAL ALEXANDRA HOSPITAL
FRIDAY, MAY 24, 1991
2:00 P.M.

EDMONTON
SOCIETY FOR THE RETIRED & SEMI RETIRED
FRIDAY, APRIL 19, 1991
1:00 P.M.

FAIRVIEW
DUNVEGAN MOTOR INN
TUESDAY, MARCH 26, 1991
2:30 P.M.

FOX CREEK
FOX CREEK PROVINCIAL COURT HOUSE
THURSDAY, SEPTEMBER 26, 1991
7:15 P.M.

GRANDE PRAIRIE
GOLDEN AGE CENTRE
TUESDAY, JUNE 11, 1991
2:24 P.M.

GIBBONS
DEW DROP IN CENTRE
THURSDAY, NOVEMBER 21, 1991
3:00 P.M.

GRIMSHAW
NEW HORIZONS DROP-IN CENTRE
TUESDAY, MARCH 26, 1991
10:30 A.M.

HIGH PRAIRIE
SENIOR CITIZENS CENTRE
FRIDAY, SEPTEMBER 27, 1991
2:10 P.M.

JASPER
OIKA FOUNDATION
TUESDAY, SEPTEMBER 12, 1991
2:00 P.M.

KILLAM
AUXILIARY HOSPITAL
WEDNESDAY, OCTOBER 16, 1991
2:30 P.M.

LETHBRIDGE
LETHBRIDGE SENIORS CENTRE
FRIDAY, APRIL 12, 1991
10:00 A.M.

LLOYDMINSTER
SENIORS DROP IN CENTRE
TUESDAY, DECEMBER 10, 1991
1:00 p.m.

MEDICINE HAT
REGIONAL HOSPITAL
TUESDAY, APRIL 30, 1991
2:00 P.M.

OLDS
OLDS HOSPITAL
FRIDAY, APRIL 26, 1991
1:45 P.M.

RIMBEY
RIMBEY HOSPITAL
THURSDAY, OCTOBER 24, 1991
10:00 a.m.

ST. ALBERT
CHATEAU MISSION COURT
TUESDAY, MARCH 5, 1991
2:45 P.M.

STONY PLAIN
DIAMOND JUBILEE MANOR
WEDNESDAY, APRIL 17, 1991
2:00 P.M.

SWAN HILLS
COMMUNITY CENTRE
FRIDAY, MAY 31, 1991
2:15 P.M.

WABASCA/DESMARAIS
SENIOR CITIZENS LODGE
TUESDAY OCTOBER 8, 1991
2:00 P.M.

WESTLOCK
SMITHFIELD LODGE
WEDNESDAY, NOVEMBER 27, 1991
7:00 P.M.